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CONFIRMATION NO. 3135

<b>SERIAL NUMBER</b> 10/517,120	<b>FILING OR 371(c) DATE</b> 12/02/2004 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1616	<b>ATTORNEY DOCKET NO.</b> 833-131 US
<b>APPLICANTS</b> Ettore Bergamini, Pisa, ITALY; Zina Gori, Lari, ITALY; Francesco Lenci, Pisa, ITALY; Antonella Sgarbossa, Pisa, ITALY; Emo Chiellini, Pisa, ITALY; Ranieri Bizzarri, Cascina, ITALY;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/EP03/05550 05/27/2003 <b>** FOREIGN APPLICATIONS *****</b> ITALY MI2002A001204 06/04/2002				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Unkley</i> <i>Wandy</i> <i>NH</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> ITALY	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 9
				<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 26817				
<b>TITLE</b> Compositions containing dolichol for dermatological and cosmetic use				
<b>FILING FEE RECEIVED</b> 950	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	